Concerning United States Public Health Service activities on veneral disease information.

To the Editor:—It is desired to bring to your attention the monthly abstract journal of the Public Health Service, known as *Venereal Disease Information.* This small publication is prepared for the practicing physicians of the United States because it is absolutely necessary to gain their coöperation and assistance in the public health program now being waged against these diseases.

Your coöperation in again calling the attention of your readers to this publication will be greatly appreciated. The descriptive material in the accompanying leaflet offers a satisfactory form for presentation.

By direction of the Surgeon-General.

Respectfully,
R. A. VONDERLEHR,
Assistant Surgeon-General,
Division of Venereal Diseases.

* * *

Venereal Disease Information is a monthly publication prepared by the United States Public Health Service for distribution among the medical profession throughout the United States. It measures approximately 6 by 9 inches and ranges in size from twenty-five to seventy-five pages.

It is the purpose of the Public Health Service in issuing this publication to provide in condensed form a monthly summary of the scientific developments in the diagnosis, treatment, and control of syphilis and gonorrhea. More than three hundred American and foreign journals are reviewed for this work. Abstracts are made of articles describing laboratory, pathologic, and clinical work in the field of venereal diseases.

The most important literature on every phase of the subject is presented in the form of brief abstracts that are easily read. An index for the year is published with the December issue.

During the past year thousands of physicians found this publication useful in enabling them to keep abreast with developments in venereal disease work.

The cost of this publication is only fifty cents per annum, payable in advance to the Superintendent of Documents, Government Printing Office, Washington, D. C. It is desired to remind the reader that this nominal charge represents only a very small portion of the total expense of preparation, the journal being a contribution of the Public Health Service in its program with state and local health departments directed against the venereal diseases. If you wish to secure the valuable service which this monthly magazine provides, send fifty cents to the Superintendent of Documents, Government Printing Office, Washington, D. C.

Concerning Court of Appeal decision on Kern County Hospital case: Objection raised to extending county hospital facilities to county employees.*

ASSOCIATION OF CALIFORNIA HOSPITALS
HOTEL WHITCOMB
SAN FRANCISCO, CALIFORNIA

February 7, 1936.

John V. Barrow, M. D.,
1110 Wilshire Medical Building,
Los Angeles, California.

Dear Doctor Barrow:

As chief of staff of the Los Angeles County Hospital you will be interested in the decision handed down by the Fourth District Court of Appeal in the Kern County case. I am attaching hereto a copy of their order, which is self-explanatory.

I believe this decision puts on a stronger basis the fact that the county hospitals will be limited to indigent sick. However, in this decision you will notice one paragraph, under (*h*), "A county employee injured in the course of his employment by the county when hospitalization is reasonably required to cure and relieve the effects of such injury," we as private hospitals are strongly opposed to county employees being hospitalized at a county institution for injuries arising during employment coming under compensation insurance. I do not believe the Los Angeles County employees are being hospitalized at the County Hospital, but I merely call your attention to this part of the ruling in case the question is brought up with reference to our county institution. I believe we should oppose such a move, which is against the best interests of taxpayers, doctors, and private hospitals.

From time to time emergency cases coming under insurance are hospitalized at the County Hospital, due to the fact that they cannot refuse an emergency. However, in the past I know some insurance companies have worked this as a racket, seeing that the patient is sent to the County Hospital and after they get him entered, pleaded responsibility, but ask that the patient be left there and they will assume the charge. In these cases it is very unjust to the taxpayers to merely charge the per diem rate. Most of the cases require extensive x-rays, fracture appliances, etc. My opinion is that the Board of Supervisors, through the hospital, should set a high rate for such emergencies, which would immediately discourage such patients being shifted to the county institution.

I trust that you will go over this court order and give me your views.

Very truly yours,
ASSOCIATION OF CALIFORNIA HOSPITALS.
By R. E. Heerman, President.

Concerning pathologic and radiologic services, legally considered—may they be divided into professional and technical fields?*

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH
SACRAMENTO

San Francisco,
February 5, 1936.

George H. Kress, M. D.,
Member, State Board of Public Health,
Los Angeles, California.

Dear Doctor Kress:

Enclosed please find copy of opinion from the Attorney-General's office, which will probably be of interest to you.

Very truly yours,
WALTER M. DICKIE, M. D.,
Director of Public Health.

313 State Building.

* * *

STATE OF CALIFORNIA
LEGAL DEPARTMENT

San Francisco,
February 5, 1936.

Walter M. Dickie, M. D.,
Director of Public Health,
313 State Building,
San Francisco, California.

Dear Sir:

In your communication of November 14, 1935, you call attention to the opinion of this office, No. 10171, which answered certain questions asked by your Board relative to the interpretation of Chapter 386, Statutes of 1935.

The chapter referred to deals with the supplying of hospital services by corporations organized for nonprofit purposes.

In reply to your questions whether corporations might contract to furnish pathologic and radiologic services to individuals and whether pathology and radiology could be divided into professional and technical fields, this office replied that pathologic and radiologic services might be furnished by corporations where such services did not constitute the practice of medicine, and that pathology and radiology could be divided into professional and technical fields.

You now ask, "Where in pathology and radiology are the dividing lines between the professional and technical fields?"

*See also, pages 146 and 189.

*See also editorial comment (p. 148).

In reply I would state that the law of this state does not recognize or deal with special subjects or branches of the field of medicine. The practice of medicine generally, rather than the practice of any specific branch thereof, except by persons licensed to do so, is prohibited (Sections 8 and 17, Medical Practice Act).

The dividing line between a professional and a technical act is at the point where a person does that thing or those things which constitute the practice of medicine, to wit, practices or attempts to practice, or advertises or holds himself out as practicing, any system or mode of treating the sick or afflicted in this State, or diagnoses, treats, operates for, or prescribes for any ailment, blemish, deformity, disease, disfigurement, disorder, injury, or other mental or physical condition of any person.

While there is unquestionably work for a technician and work of a purely professional nature in the medical as well as in any other professional field, it would seem to be a question of fact in each instance whether any particular act or conduct violates the provisions of the law. It occurs to us that the question of whether a particular act or course of conduct constitutes the practice of medicine is one about which scientific and even medical men might differ. If this be so, such difference of opinion might well be taken into account by a court when determining whether such act or conduct constitutes the practice of medicine as a matter of law. Such determination by the court will, however, be made upon a consideration of all the facts adduced and of the law applicable thereto. It should not be attempted, as indeed it cannot be made, by this office on a question of law alone, and without having before us a concrete statement of facts.

Very truly yours,

U. S. WEBB, *Attorney-General.*
By Lionel Browne, Deputy.

Concerning article on liver suppuration.

To the Editor:—The CALIFORNIA AND WESTERN MEDICINE for January, 1936, on page 44, published, under Clinical Notes, a summary on liver suppuration. The following may be of interest:

On December 21, 1935, a 47-year-old salesman was seen by the author of that screed with Edward L. Laughlin, M. D., of Los Angeles. The patient became acutely ill three days prior with fever, fast pulse, and a distended abdomen. He had had some sugar in the urine, off and on, for several years.

Examination found mild irrationality; albumen and granular casts in the urine; blood pressure, 120/80; blood sugar, 104; white blood cells, 19,000; polymorphonuclears, 88 per cent; hemoglobin, 70 per cent; and bowels loose.

Diagnosis: Acute exacerbation of a chronic parenchymatous nephritis. Prognosis: Gravis. Treatment: Supportive.

The autopsy of January 28, 1936, found a multilocular abscess of the right lobe of the liver, which contained over 1,000 cubic centimeters of an odorless, milky colored, slightly greenish-tinged pus. No primary focus was discovered.

Here, then, was massive liver suppuration, clinically unsuspected, and its etiology pathologically undetected!

Submissively

JOHN W. SHUMAN, M. D.

Concerning requests for copies of proceedings in disciplinary actions: Under what conditions to be given.

Re: Appeal of Dr. Joseph Smith, and others, Kern County Society.

February 7, 1936.

Dear Doctor Warnshuis:

Referring to recent telephone conversations with you and with Messrs. Borton & Petrini, attorneys for the appellant doctors, in regard to Mr. Petrini's request for a copy of the record of proceedings taken by the Kern County Society resulting in the suspension of the appellant doctors, I suggested that a meeting of the Executive Committee be held to pass on this request.

I informed Mr. Petrini that a meeting would be held, and as the hearing is set for April 11, there would be ample time to hold such meeting before that date.

Meanwhile, we have been looking into the matter and have prepared a memorandum opinion thereof, copy of which I enclose.

Very truly yours,

HARTLEY F. PEART.

P. S.: I am sending carbon copies to the Association officers for their information.

* * *

February 7, 1936.

Dr. F. C. Warnshuis,
Secretary, California Medical Association,
450 Sutter Street,
San Francisco, California.

Re: Appeal of Kern County Members. Right of Appellant Doctors to Copy of Record of Proceedings Before County Society.

Dear Doctor:

To determine whether or not a member of a county society who has appealed to the Council of the California Medical Association in accordance with Section 4, Chapter II, of the by-laws of the California Medical Association, is entitled to a copy of the record of the proceedings had in the county society, it is necessary to consider, first, the by-laws of the California Medical Association, and second, if the by-laws do not solve the problem, those court decisions which are applicable.

1. CALIFORNIA MEDICAL ASSOCIATION BY-LAWS.

The only by-laws of the California Medical Association which appear to have any bearing upon the above-stated question are Sections 4 and 5 of Chapter II. Section 4 merely authorizes a member who may feel aggrieved by the action of his component county society in censuring, suspending or expelling him to appeal to the Council. Section 4 also requires (*a*) that the appeal be in writing, (*b*) that it be filed in the office of the secretary-treasurer, and (*c*) that appeals shall be heard by the Council only after reasonable notice in writing of the time and place of the hearing. Section 5 relates to the procedure to be followed before the hearing and at the hearing. It is very general in its terms and does not refer to the record of the proceedings in the county society either directly or by implication.

It is, therefore, necessary to conclude that the by-laws of the California Medical Association do not provide an answer to the question under consideration.

2. APPLICABLE COURT DECISIONS.

The viewpoint of the law with respect to this question may best be stated by quoting a short paragraph from a New York case. In *Mead's Case,* 35 N. Y. S. at 218, 8 App. Div. at 596, the Court held:

"The relator was entitled to a fair trial, after due notice, before an impartial tribunal, and as the method of procedure was not regulated by the laws of the Association *it should be analogous to that observed in ordinary judicial proceedings,* so far, at least, to promote substantial justice."

The above quoted rule of law is also followed in *Reid v. Medical Society of Oneida County,* 156 N. Y. S. 780.

With respect to the instant question, the by-laws of the California Medical Association do not regulate the procedure to be followed with respect to copies of the record. Therefore, in order to comply with the judicial requirements of a "fair trial" it is necessary to observe, in so far as is possible, the proceedings in ordinary cases at law. In California when a party to an action in the Superior Court takes an appeal either to the District Court of Appeal or to the Supreme Court, the court reporter transcribes into typewriting from his shorthand notes all of the testimony adduced at the trial and the county clerk prepares a copy of all the pleadings filed in the case. The party who appeals is required to pay the court reporter's fee and the county clerk's fee for transcribing and copying the original. If the party appealing desires a copy for his